

**FEC
FORM 3X**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

RECEIVED
FEC MAIL CENTER

2016 DEC -6 PM 12:09
Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

I AM DYSLEXIA LLC

ADDRESS (number and street)

14318 COSETTE WAY N



Check if different
than previously
reported. (ACC)

HN 60

MN

55038-4440

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

000586768

3. IS THIS
REPORT



NEW
(N)

OR



AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:



April 15
Quarterly Report (Q1)



July 15
Quarterly Report (Q2)



October 15
Quarterly Report (Q3)



January 31
Year-End Report (YE)



July 31 Mid-Year
Report (Non-election
Year Only) (MY)



Termination Report
(TER)

(b) Monthly
Report
Due On:



Feb 20 (M2)



May 20 (M5)



Aug 20 (M8)



Nov 20 (M11)
(Non-Election
Year Only)



Mar 20 (M3)



Jun 20 (M6)



Sep 20 (M9)



Dec 20 (M12)
(Non-Election
Year Only)



Apr 20 (M4)



Jul 20 (M7)



Oct 20 (M10)



Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

MM / DD / YYYY

MM / DD / YYYY

MM / DD / YYYY

in the
State of

MM / DD / YYYY

(d) 30-Day
POST-Election
Report for the:



General (30G)



Runoff (30R)



Special (30S)

Election on

MM / DD / YYYY

MM / DD / YYYY

MM / DD / YYYY

in the
State of

MM / DD / YYYY

5. Covering Period

11/15/2015 through 11/29/2016

through

11/29/2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

JOSE BERGER

Signature of Treasurer

[Signature]

Date

11/29/2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office
Use
Only

FEC FORM 3X
Rev. 05/2016

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2 of 9

Write or Type Committee Name

I AM DUSKINIA LLC

Report Covering the Period:

From:

10 / 20 / 2016

To:

11 / 28 / 2016

COLUMN A
This Period

COLUMN B
Calendar Year-to-Date

6. (a) Cash on Hand
January 1,

2016

618120

- (b) Cash on Hand at
Beginning of Reporting Period.....

1235458

- (c) Total Receipts (from Line 19)

441805

1416164

- (d) Subtotal (add Lines 6(b) and
6(c) for Column A and Lines
6(a) and 6(c) for Column B)

1707263

2034290

7. Total Disbursements (from Line 31)

337203

664230

8. Cash on Hand at Close of
Reporting Period
(subtract Line 7 from Line 6(d))

1370060

1370060

9. Debts and Obligations Owed TO
the Committee (Itemize all on
Schedule C and/or Schedule D)

10. Debts and Obligations Owed BY
the Committee (Itemize all on
Schedule C and/or Schedule D)



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3 of 9

Write or Type Committee Name

I Am Dyslexia LLC

Report Covering the Period:

From:

10/20/2016

To:

11/28/2016

I. Receipts

COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A).....

449305

115496

(ii) Unitemized.....

22500

261203

(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶

471805

1416164

(b) Political Party Committees.....

(c) Other Political Committees (such as PACs).....

(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶

471805

1416164

12. Transfers From Affiliated/Other Party Committees.....

13. All Loans Received.....

14. Loan Repayments Received.....

15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....

16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....

17. Other Federal Receipts (Dividends, Interest, etc.).....

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account (from Schedule H3).....

(b) Levin Funds (from Schedule H5).....

(c) Total Transfers (add 18(a) and 18(b))..

19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶

471805

1416164

20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶

471805

1416164

2016-11-28 12:00:00 AM

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5 of 9

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	421805	1416169
34. Total Contribution Refunds (from Line 28(d))		
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	421805	1416169
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	337203	669230
37. Offsets to Operating Expenditures (from Line 15, page 3)		
38. Net Operating Expenditures (subtract Line 37 from Line 36)	337203	669230

2016-12-09 09:01:00-11866

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 9

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
I Am Dyslexia LLC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
GINA NELSON

Mailing Address
29806 LABRADOR BEAR RD

City **PERHAM RAPIDS** State **MN** Zip Code **56572**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **LILAN LAMES** Occupation (for Individual) **RN/OWNER**

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
800.00

Date of Receipt
10/21/2016

Amount of Each Receipt this Period
100.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
GINA NELSON

Mailing Address
29806 LABRADOR BEAR RD

City **PERHAM RAPIDS** State **MN** Zip Code **56572**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **LILAN LAMES** Occupation (for Individual) **RN/OWNER**

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
900.00

Date of Receipt
11/21/2016

Amount of Each Receipt this Period
100.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
JAMES STEICKLER

Mailing Address
691 MAPLE TREE LN

City **BRANFORD** State **KY** Zip Code **41018**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
11/21/2016

Amount of Each Receipt this Period
250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ **2250.00**

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:		PAGE <u>7</u> OF <u>9</u>	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

I Am Dyslexia LLC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. <u>OLUACE ADAYE</u>		Date of Receipt	
Mailing Address <u>3607 Oak Cir</u>		<u>11</u> / <u>17</u> / <u>2016</u>	
City <u>St. Cloud</u>	State <u>MN</u>	Zip Code <u>56301</u>	
FEC ID number of contributing federal political committee. <u>C</u>		Amount of Each Receipt this Period <u>250.00</u>	
Name of Employer (for Individual)		<input type="checkbox"/> Memo Item	
Occupation (for Individual)			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <u>250.00</u>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. <u>TAMARA TINKHAM</u>		Date of Receipt	
Mailing Address <u>4815 Lilac Pl</u>		<u>11</u> / <u>17</u> / <u>2016</u>	
City <u>LAKE ELMO</u>	State <u>MN</u>	Zip Code <u>55402</u>	
FEC ID number of contributing federal political committee. <u>C</u>		Amount of Each Receipt this Period <u>25.00</u>	
Name of Employer (for Individual) <u>SELF EMPLOYED</u>		<input type="checkbox"/> Memo Item	
Occupation (for Individual) <u>PSYCHIATRIST</u>			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <u>575.00</u>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. <u>RUN SIGNUP</u>		Date of Receipt	
Mailing Address <u>300 Mill St. Ste 200</u>		<u>10</u> / <u>29</u> / <u>2016</u>	
City <u>MOORESBURG</u>	State <u>WI</u>	Zip Code <u>08057</u>	
FEC ID number of contributing federal political committee. <u>C</u>		Amount of Each Receipt this Period <u>3452.00</u>	
Name of Employer (for Individual)		<input type="checkbox"/> Memo Item	
Occupation (for Individual)			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ <u>3952.00</u>	

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

<u>3727.00</u>

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER: PAGE **8** OF **9**

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

I Am Dyslexia LLC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. **DC DDA**

Mailing Address **9006 STREAMVIEW LN**

City **VIENNA** State **VA** Zip Code **22182**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **10 / 29 / 2016**

Amount of Each Receipt this Period **250.00**

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. **SHANNON DONNAN**

Mailing Address **7212 TIMBER LN**

City **FAIRFAX** State **VA** Zip Code **22046**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ **291.05**

Date of Receipt **11 / 10 / 2016**

Amount of Each Receipt this Period **291.05**

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C.

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

541.05

4493.05

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 9 OF 9

☒ 21b ☐ 22 ☐ 23 ☐ 26 ☐ 27
☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

I AM Dyslexia LLC

Full Name (Last, First, Middle Initial)

A. SHANNON DUNCAN

Mailing Address

4217 TIMBER LANE

City

FALLS CHURCH

State

VA

Zip Code

22046

Purpose of Disbursement

Administration

Candidate Name

001

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

11/03/2016

FEC Identification Number

C

Amount of Each Disbursement this Period

1593.34

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. FAIRFAX COUNTY DASH AUTHORITY

Mailing Address

12055 Government Center Drive

City

FAIRFAX

State

VA

Zip Code

22035

Purpose of Disbursement

Administration

Candidate Name

001

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

11/03/2016

FEC Identification Number

C

Amount of Each Disbursement this Period

228.75

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. LISA IRONS

Mailing Address

4219 TIMBER LANE

City

FALLS CHURCH

State

VA

Zip Code

22046

Purpose of Disbursement

Administration

Candidate Name

001

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

11/03/2016

FEC Identification Number

C

Amount of Each Disbursement this Period

13039.2

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

3076.04

3076.04

1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100

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USPS TRACKING[™] INCLUDED*

INSURANCE INCLUDED*

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LABEL MAY BE REQUIRED.

FROM:

Tom Dysbar
14318 Casette Way N
11301 MN 55033-4440

TO:

Federal Election Commission
999 E Street, NW
Washington, DC 20543

RECEIVED
FEC MAIL CENTER
2016 DEC -6 PM 12:09

U.S. POSTAGE
PAID
MINNEAPOLIS, MN
55403
NOV 30, 16
AMOUNT
\$6.45
R2304Y122951-12



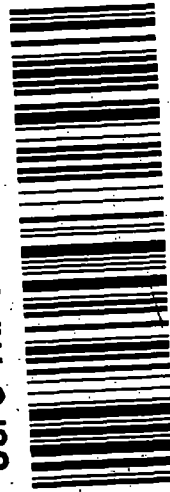
20463



1006

Expected Delivery Day: 12/03/2016

USPS TRACKING NUMBER



9505 5132 8592 6335 0194 32



Federal Election Commission
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The FEC added this page to the end of this filing to indicate how it was received.

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Date of Receipt

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Postmarked

Date of Receipt

☐

USPS Registered/Certified

Postmarked (R/C)

☒

USPS Priority Mail

Postmarked

11/30/16

☐

USPS Priority Mail Express

Postmarked

☐

Postmark Illegible

☐

No Postmark

☐

Overnight Delivery Service (Specify):

Shipping Date

Next Business Day Delivery

☐☐

Received from House Records & Registration Office

Date of Receipt

☐

Received from Senate Public Records Office

Date of Receipt

☐

Received from Electronic Filing Office

Date of Receipt

☐

Other (Specify):

Date of Receipt or Postmarked

PREPARER
(3/2015)

[Signature]

12/16/16
DATE PREPARED

201612160121872